

## APPLICATION FOR TRAFFIC VIOLATOR SCHOOL OPERATOR AND INSTRUCTOR LICENSE

DMV USE ONLY	
TVS NUMBER	
DATE PERMIT ISSUED	DATE PERMIT EXPIRES
TOTAL FEE	SUSPENSE RECEIPT NUMBER
ISSUED BY	INSP/TECH NUMBER

### SECTION A — TYPE LICENSE AND APPLICATION *Check all that apply.*

#### OPERATOR

☐ ORIGINAL ☐ ADDITIONAL ☐ REINSTATEMENT

Applicant *Complete Sections B & F*

Owner/Operator *Complete Sections C & D*

#### INSTRUCTOR

☐ ORIGINAL ☐ ADDITIONAL ☐ REINSTATEMENT

Applicant *Complete Sections B & F*

Owner/Operator *Complete Sections C & \*E*

### SECTION B — APPLICANT INFORMATION

TRUE FULL NAME (LAST, FIRST, MIDDLE)

DAYTIME CONTACT TELEPHONE NUMBER

( )

MAILING ADDRESS

CITY

STATE

ZIP CODE

RESIDENCE ADDRESS

CITY

STATE

ZIP CODE

IF APPLYING FOR AN ADDITIONAL LICENSE, LIST CURRENT TVS **OPERATOR** LICENSE(S)

IF APPLYING FOR AN ADDITIONAL LICENSE, LIST CURRENT TVS **INSTRUCTOR** LICENSE(S)

### SECTION C — EMPLOYER CERTIFICATION

SCHOOL NAME (DBA)

TVS NUMBER

SCHOOL ADDRESS

CITY

STATE

ZIP CODE

BUSINESS OFFICE HOURS

AREA CODE/TELEPHONE NUMBER

( )

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that I am the owner and /or current operator of the employing licensee named herein. It is my intention to employ the above named applicant when he/she receives a temporary permit or license from the Department of Motor Vehicles.***

PRINTED NAME OF OWNER/OPERATOR (OPERATOR CANNOT SIGN FOR HIMSELF/HERSELF UNLESS HE/SHE IS THE OWNER)

☐ OWNER ☐ OPERATOR

OWNER/OPERATOR SIGNATURE

DATE

**X**

### SECTION D — CERTIFICATION FOR OPERATOR LICENSE

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that the licensee name herein has the knowledge necessary to perform the duties of an operator.***

OWNER SIGNATURE

DATE

**X**

### SECTION E — CERTIFICATION FOR INSTRUCTOR LICENSE

***\*For Original and Reinstatement applications only.***

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that the licensee name herein has been administered and successfully passed a written examination.***

OWNER/OPERATOR SIGNATURE

DATE

**X**

### SECTION F — APPLICANT CERTIFICATION

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.***

SIGNATURE

DATE

**X**

